

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	m (s)		12/17/99
O.I.P.E. CLASSIFIER		5	1/3/00
FORMALITY REVIEW	W	67477	2/1/00
RESPONSE FORMALITY REVIEW	WN	67479	3/29/00

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Date
Final	
1 Original	1/16/00
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If more than 150 claims or 10 actions  
staple additional sheet here

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